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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Peter First name M. Middle name		Jana First name M. Middle name
	Bring your picture identification to your meeting with the trustee.	Crabtree Last name and Suffix (Sr., Jr., II, III)	-	Crabtree Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	,		
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2841		xxx-xx-1103

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Debtor 1 Peter M. Crabtree
Debtor 2 Jana M. Crabtree

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	821 NE Holcomb Drive Mundelein, IL 60060	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code Lake County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
this district to file for bankruptcy Over I hat other		I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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_	btor 1 btor 2	Peter M. Crabtree Jana M. Crabtree			Boodinient		Case number (if known)			
Par	rt 2·	Tell the Court About \	Your Bank	runtov Ca	se					
7.	The	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy							
	choosing to file under		■ Chapt	■ Chapter 7						
			☐ Chapt							
			☐ Chapt							
			☐ Chapt							
8.	How	you will pay the fee	abo ord	out how yo	u may pay. Typically, if you attorney is submitting your	are paying the fee	heck with the clerk's office in your local court for more details be yourself, you may pay with cash, cashier's check, or money behalf, your attorney may pay with a credit card or check with			
			☐ Ine	ed to pa			ption, sign and attach the Application for Individuals to Pay			
			☐ I re but app	equest that is not requires to yo	t my fee be waived (You muired to, waive your fee, and ur family size and you are ur	nay request this op d may do so only if nable to pay the fe	otion only if you are filing for Chapter 7. By law, a judge may, if your income is less than 150% of the official poverty line that be in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the		■ No.							
		ruptcy within the 3 years?	☐ Yes.							
				District		When	Case number			
				District		When	Case number			
				District		When	Case number			
10.		nny bankruptcy	■ No							
	filed not fi you,	s pending or being by a spouse who is ding this case with or by a business her, or by an ate?	☐ Yes.							
				Debtor			Relationship to you			
				District		When	Case number, if known			
				Debtor			Relationship to you			
				District		When	Case number, if known			
11.		ou rent your	■ No.	Go to	ine 12.					
	resid	ence?	☐ Yes.	Has yo	ur landlord obtained an evic	tion judgment aga	ainst you?			
					No. Go to line 12.					
					Yes. Fill out Initial Stateme	nt About an Eviction	on Judgment Against You (Form 101A) and file it as part of			

this bankruptcy petition.

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Debtor 1 Peter M. Crabtree

Deb	otor 2 Jana M. Crabtree				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owr	n as a Sole Proprie	etor
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to	Part 4.	
		■ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as		Jana	Crabtree	
	an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a		_	NE Holcomb Driv delein, IL 60060	ve
	separate sheet and attach		Numb	er, Street, City, Sta	ate & ZIP Code
	it to this petition.		Chec		ox to describe your business:
				Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))
Stockbroker (as defined in 11 U.S.C. § 101(53A))				defined in 11 U.S.C. § 101(53A))	
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the abov	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you ir ns, cash-f	ndicate that you are low statement, and	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am ı	not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have An	/ Hazardo	ous Property or An	ny Property That Needs Immediate Attention
	Do you own or have any	■ No.	,		3b3
	property that poses or is	□ Yes.			
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	□ res.	What is	the hazard?	
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
	-				Number, Street, City, State & Zip Code

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Debtor 1 Peter M. Crabtree
Debtor 2 Jana M. Crabtree

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-16305 Doc 1 Filed 06/07/18 Entered 06/07/18 10:53:02 Desc Main Document Page 6 of 56

	tor 1 tor 2	Peter M. Crabtree Jana M. Crabtree		Boodinent	r age o	Case number	⊖r (if known)			
Part	· 6·	Answer These Questi	ons for Re	enorting Purnoses			<u> </u>			
		t kind of debts do	16a.		ner debts? Cons	sumer debts are def	ined in 11 U.S.C. § 101(8) as "incurred by an			
. •.	you have?		individual primarily for a personal, family, or household purpose."							
				☐ No. Go to line 16b.						
				Yes. Go to line 17.						
			16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
				☐ No. Go to line 16c.	-					
				☐ Yes. Go to line 17.						
			16c.	State the type of debts you owe that	at are not consur	mer debts or busine	ss debts			
17.		ou filing under oter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.					
	after	ou estimate that any exempt erty is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			perty is excluded and administrative expenses ?			
	adm	administrative expenses are paid that funds will be available for distribution to unsecured creditors?		■ No						
	be a			☐ Yes						
18.		How many Creditors do you estimate that you owe?	1 -49		1 ,000-5,000		2 5,001-50,000			
	-		□ 50-99		☐ 5001-10,000 ☐ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000			
□ 100-199 □ 200-999			1 0,001-25,0	00	☐ More than 100,000					
19.		ow much do you	□ \$0 - \$£	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
		nate your assets to orth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			\$100,001 - \$500,000 \$500,001 - \$1 million			01 - \$500 million	☐ More than \$50 billion			
20.		much do you	□ \$0 - \$ <u>\$</u>	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion			
	to be	nate your liabilities e?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
				001 - \$300,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion			
Part	t 7:	Sign Below								
For	you		I have ex	amined this petition, and I declare u	nder penalty of p	perjury that the infor	mation provided is true and correct.			
				chosen to file under Chapter 7, I am ates Code. I understand the relief a			, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.			
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					ot an attorney to help me fill out this					
					ecified in this petition.					
				cy case can result in fines up to \$25			or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
			/s/ Peter	r M. Crabtree		/s/ Jana M. Cral				
				. Crabtree e of Debtor 1		Jana M. Crabtre Signature of Debto				
			Executed	on June 6, 2018 MM / DD / YYYY		Executed on Ju	ne 6, 2018 // DD / YYYY			

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Debtor 1 Peter M. Crabtre	Document	Page 7 of 56		
Debtor 2 Jana M. Crabtre		Case	e number (if known)	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have e	xplained the relief a	vailable under each chapter
If you are not represented by an attorney, you do not need to file this page.	, , , , , , , , , , , , , , , , , , , ,	s, certify that I have no know	ledge after an inquir	y that the information in the
	/s/ Stephen S. Newland	Date	June 6, 2018	

75/ Stephen 5. Newland	Date	Julie 6, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Stephen S. Newland		
Printed name		
Newland and Newland, LLP		
Firm name		
1512 Artaius Parkway		
Suite #300		
Libertyville, IL 60048		
Number, Street, City, State & ZIP Code		
Contact phone 847-549-0000	Email address	bk7@newlandlaw.com
6207458 IL		
Bar number & State		

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		Docume	ent Page 8 of 56				
Fill in this information to identify your case:							
Debtor 1	Peter M. Crabtree						
	First Name	Middle Name	Last Name				
Debtor 2	Jana M. Crabtree						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number							

☐ Check if this is an amended filing

Official Form 106Sum

(if known)

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	350,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,434.27
	1c. Copy line 63, Total of all property on Schedule A/B	\$	360,434.27
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	549,055.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	82,561.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	2,438.69
	Your total liabilities	\$	634,054.69
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,909.58
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,487.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other scl	hedules.
7.	■ Yes What kind of debt do you have?		
	Vour dabts are primarily consumer dabts. Consumer dabts are those "incurred by an individual primarily for a		family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 Ú.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Peter M. Crabtree

Debtor 2 Jana M. Crabtree

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Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,480.11

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	82,561.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	82,561.00

Case 18-16305 Doc 1 Filed 06/07/18 Entered 06/07/18 10:53:02 Desc Main Document Page 10 of 56 Fill in this information to identify your case and this filing: Debtor 1 Peter M. Crabtree First Name Middle Name Last Name Debtor 2 Jana M. Crabtree (Spouse, if filing) Middle Name Last Name First Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. Yes. Where is the property? 1 1 What is the property? Check all that apply 821 NE Holcomb Dr Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative П ■ Manufactured or mobile home Current value of the Current value of the IL Mundelein 60060-0000 ☐ Land entire property? portion you own? City \$350,000.00 \$350,000.00 ZIP Code State ■ Investment property ☐ Timeshare Describe the nature of your ownership interest □ Other (such as fee simple, tenancy by the entireties, or

a life estate), if known. Who has an interest in the property? Check one Tenancy by the entirety ☐ Debtor 1 only Lake ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local

property identification number:

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

\$350,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 18-16305 Doc 1 Filed 06/07/18 Entered 06/07/18 10:53:02 Desc Main Document Page 11 of 56

Debtor 2	Jana M. Crabtree		Case number (if known)	
Cars, var	ns, trucks, tractors, sport utility ve	ehicles, motorcycles		
□ No				
Yes				
o 4 Mala	· Honda	Who has an interest in the mass at 0.00	Do not deduct secured cl	aims or exemptions. Put
3.1 Make:	<u> </u>	Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
Model Year:		☐ Debtor 1 only ☐ Debtor 2 only	Creditors Who Have Clai	ms secured by Property.
	eximate mileage: 220000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	information:	☐ At least one of the debtors and another	chare property:	portion you own.
		Check if this is community property (see instructions)	\$2,500.00	\$2,500.00
3.2 Make:	· Honda	Who has an interest in the property? Check one	Do not deduct secured cl	
Mode		Debtor 1 only	the amount of any secure Creditors Who Have Clai	
Year:	···	Debtor 2 only	Orealions who have old	ms decured by I Toperty.
	eximate mileage: 218000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	information:	☐ At least one of the debtors and another	onino proporty i	portion you own.
		— A road one of the desicle and another		
		☐ Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
3.3 Make:	Oldsmobile	Who has an interest in the property? Check one	Do not deduct secured cl	
Mode	Silhouete	■ Debtor 1 only	the amount of any secure Creditors Who Have Clai	
Year:		Debtor 2 only	Current value of the	Current value of the
Appro	oximate mileage: 157000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other	information:	\square At least one of the debtors and another		
Valu	e per Edmund's estimate	Check if this is community property (see instructions)	\$800.00	\$800.00
		nd other recreational vehicles, other vehicles, atercraft, fishing vessels, snowmobiles, motorcycles,		
		n for all of your entries from Part 2, including that number here		\$4,300.00
art 3: Des	cribe Your Personal and Household It	ems		
o you owi	n or have any legal or equitable in	terest in any of the following items?	}	Current value of the portion you own? Do not deduct secured claims or exemptions.
Example No	old goods and furnishings es: Major appliances, furniture, linens Describe	s, china, kitchenware		
		ıstomary Furniture, Home furnishings, Ap lousehold goods and sundries	ppliances,	\$2,500.0

Official Form 106A/B Schedule A/B: Property page 2

Entered 06/07/18 10:53:02 Case 18-16305 Doc 1 Filed 06/07/18 Desc Main Page 12 of 56 Document Debtor 1 Peter M. Crabtree Debtor 2 Jana M. Crabtree Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... 2 computers, cell phones, conventional household electroncis, 10 \$200.00 yo 32: TV, ipad 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments □ No Yes. Describe..... Rifle .410; .22 Remington rifle; 20 guage shotgun; all 40 years old \$200.00 \$300.00 3 bicycles 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$450.00 Usual and necessary wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$500.00 Wedding set, costume jewelry \$300.00 Wedding ring, watch misc. men's jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... Domestic pet dog and cat, no show, breeding or resale value \$0.00

14. Any other personal and household items you did not already list, including any health aids you did not list

No

☐ Yes. Give specific information.....

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Examples: Bond funds, investment accounts with brokerage firms, money market accounts

■ No

Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☐ Yes. Give specific information about them

Issuer name:

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	ebtor 1 ebtor 2	Jana M. Ci			Case number (if	known)		
			on accounts in IRA, ERISA, Keogh, 40	1(k), 403(b), thrift savings	accounts, or other pension or profit-	sharing plans		
	☐ Yes. L	ist each acco	ount separately. Type of account:	Institution na	ame:			
	Your sh	are of all unu			inue service or use from a company tric, gas, water), telecommunications	companies, or others		
				Institution na	ame or individual:			
23.	Annuitie ■ No	es (A contract	t for a periodic payment of	money to you, either for	life or for a number of years)			
	Yes		Issuer name and descript	ion.				
	4. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).							
	■ No □ Yes		Institution name and desc	cription. Separately file the	e records of any interests.11 U.S.C. §	521(c):		
25.	Trusts, ∈	equitable or	future interests in prope	erty (other than anything	g listed in line 1), and rights or pow	ers exercisable for your benefit		
	☐ Yes. (Give specific	information about them					
	Exampl	es: Internet d	trademarks, trade secre omain names, websites, p					
	☐ Yes. (Give specific	information about them					
	Exampl ■ No	les: Building p			holdings, liquor licenses, professiona	al licenses		
	☐ Yes. (Give specific	information about them					
М	oney or p	roperty owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.		
		ınds owed to	you					
	■ No □ Yes. G	Give specific in	nformation about them, inc	cluding whether you alrea	ady filed the returns and the tax years			
29.			or lump sum alimony, spo	usal support, child suppo	rt, maintenance, divorce settlement, p	property settlement		
	■ No □ Yes. G	Give specific in	nformation					
	Exampl	les: Unpaid w	eone owes you ages, disability insurance unpaid loans you made to		efits, sick pay, vacation pay, workers'	compensation, Social Security		
	■ No □ Yes. 0	Give specific	information					
31.		s in insurand les: Health, di		nealth savings account (H	HSA); credit, homeowner's, or renter's	insurance		
	_	lame the insu	rance company of each p Company name:	olicy and list its value.	Beneficiary:	Surrender or refund		

Case 18-16305 Doc 1 Filed 06/07/18 Entered 06/07/18 10:53:02 Desc Main Document Page 15 of 56 Debtor 1 Peter M. Crabtree Jana M. Crabtree Debtor 2 Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1.684.27 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information.......

Official Form 106A/B Schedule A/B: Property page 6

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Peter M. Crabtree Debtor 1 Debtor 2 Jana M. Crabtree Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$350,000.00 Part 2: Total vehicles, line 5 \$4,300.00 Part 3: Total personal and household items, line 15 \$4,450.00 57. Part 4: Total financial assets, line 36 \$1,684.27 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$10,434.27 Copy personal property total \$10,434.27

Official Form 106A/B Schedule A/B: Property page 7

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$360,434.27

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		Docume	IIL I duc 17 OI Ju	
Fill in this infor	mation to identify your	case:		
Debtor 1	Peter M. Crabtree	•		
	First Name	Middle Name	Last Name	
Debtor 2	Jana M. Crabtree			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
2005 Honda Odyssey 220000 miles Line from <i>Schedule A/B</i> : 3.1	\$2,500.00		\$2,400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)
2005 Honda Odyssey 220000 miles	\$2,500.00		\$100.00	735 ILCS 5/12-1001(b)
Ellie Holli Goricdale AVB. G.1			100% of fair market value, up to any applicable statutory limit	
2005 Honda Accord 218000 miles Line from Schedule A/B: 3.2	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(c)
Ellio II oli ochedale 70B. G.E			100% of fair market value, up to any applicable statutory limit	
2004 Oldsmobile Silhouete 157000 miles	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
Value per Edmund's estimate Line from <i>Schedule A/B</i> : 3.3			100% of fair market value, up to any applicable statutory limit	
Regular and Customary Furniture, Home furnishings, Appliances,	\$2,500.00	•	\$2,500.00	735 ILCS 5/12-1001(b)
Kitchenware, Household goods and sundries			100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 6.1				

Case 18-16305 Doc 1 Filed 06/07/18 Entered 06/07/18 10:53:02 Desc Main Page 18 of 56 Document Peter M. Crabtree Debtor 1 Debtor 2 Jana M. Crabtree Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 2 computers, cell phones, 735 ILCS 5/12-1001(b) \$200.00 \$200.00 conventional household electroncis, 10 yo 32: TV, ipad 100% of fair market value, up to Line from Schedule A/B: 7.1 any applicable statutory limit Rifle .410; .22 Remington rifle; 20 735 ILCS 5/12-1001(b) \$200.00 \$200.00 guage shotgun; all 40 years old Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit 3 bicycles. 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 9.2 100% of fair market value, up to any applicable statutory limit Usual and necessary wearing 735 ILCS 5/12-1001(a) \$450.00 \$450.00 apparel Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Wedding set, costume jewelry 735 ILCS 5/12-1001(b) \$500.00 \$500.00 Line from Schedule A/B: 12.1 П 100% of fair market value, up to any applicable statutory limit Wedding ring, watch misc. men's 735 ILCS 5/12-1001(b) \$300.00 \$300.00 jewelry Line from Schedule A/B: 12.2 100% of fair market value, up to any applicable statutory limit Domestic pet dog and cat, no show, 735 ILCS 5/12-1001(b) \$0.00 \$0.00 breeding or resale value П Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash on hand or in debtor(s) 735 ILCS 5/12-1001(b) \$100.00 \$100.00 possession Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking #2962: First Midwest Bank 735 ILCS 5/12-1001(b) \$378.72 \$378.72 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking #6477: First Midwest Bank 735 ILCS 5/12-1001(b) \$905.55 \$905.55 Line from Schedule A/B: 17.2

Utility deposit: Comed

Line from Schedule A/B: 17.5

\$300.00

100% of fair market value, up to any applicable statutory limit

100% of fair market value, up to any applicable statutory limit

\$300.00

735 ILCS 5/12-1001(b)

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Peter M. Crabtree
Jana M. Crabtree
Jana M. Crabtree

Case number (if known)

3. Are you claiming a homestead exemption of more than \$160,375?
(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Filed 06/07/18

Doc 1

Case 18-16305

Yes

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		Document	Page 2	20 of 56		
Fill in this information to i	dentify your	case:				
Debtor 1 Peter	M. Crabtre	a				
First Name			Last Name			
Debtor 2 Jana N	/I. Crabtre	9				
(Spouse if, filing) First Name			Last Name			
United States Bankruptcy C	ourt for the	NORTHERN DISTRICT OF ILLIN	IOIS			
Officed States Barikrupicy C	ouit for the.	- NORTHERN DISTRICT OF IEEE	1010		+	
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
0" : = 4000						
Official Form 106D						
Schedule D: Cre	editors	Who Have Claims S	ecure	ed by Property	v	12/15
		two married people are filing together, ut, number the entries, and attach it to				
number (if known).	r age, illi it o	ut, number the entries, and attach it to	uns ioiii.	On the top of any addition	iai pages, write your na	ille alla case
1. Do any creditors have claim	s secured by	your property?				
☐ No. Check this box a	nd submit th	is form to the court with your other so	chedules.	You have nothing else to	report on this form.	
_				. ou navo noumig oloo u		
Yes. Fill in all of the i	ntormation b	elow.				
Part 1: List All Secured	Claims			O-luma A	O-1 D	Column C
		ore than one secured claim, list the credit			Column B	
		s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
·	o a.priabotio	a. oraci accoraing to the creation of name.		value of collateral.	claim	If any
2.1 Libertyville Bank 8	k Tr	Describe the property that secures the		\$119,127.00	\$350,000.00	\$119,127.00
Creditor's Name		821 NE Holcomb Dr Mundeleir	n, IL			
		60060 Lake County				
507 N Milwuakee	l	As of the date you file, the claim is: Ch	neck all that			
Libertyville, IL 600	48	apply.				
Number, Street, City, State &		Contingent				
Number, Street, City, State &	Zip Code	Unliquidated				
Who owes the debt? Check of	one	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only		■ An agreement you made (such as mo	ortanan or c	accured		
Debtor 2 only		car loan)	ingage or s	securea		
■ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors a	nd another	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim relates		Other (including a right to offset)				
community debt	to u	Other (including a right to onset)				
_						
-	ened					
	08 Last tive					
Date debt was incurred 12/		Last 4 digits of account number	r 0001			
2.2 Newpennfin-shellp	ointm	Describe the property that secures the	a claim:	\$429,928.00	\$350,000.00	\$79,928.00
Creditor's Name		821 NE Holcomb Dr Mundeleir		Ψ+23,320.00	Ψ330,000.00	Ψ1 3,320.00
		60060 Lake County	,, .L			
		<u>*</u>				
75 Beattie PI Ste 30	00	As of the date you file, the claim is: Chapply.	eck all that			
Greenville, SC 296	01	Contingent				
Number, Street, City, State &	Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Check	one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mo	ortgage or s	secured		
Debtor 2 only		car loan)				
■ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors a	nd another	☐ Judgment lien from a lawsuit				

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Debtor	1 Peter M. C	rabtree		Ca	ase number (if know)	
	First Name	Middle Nam	e Last Name			
Debtor	2 Jana M. C	rabtree				
	First Name	Middle Nam	e Last Name			
	ck if this claim re	elates to a	Other (including a right to offset)			
Date de	ebt was incurred	Opened 03/07	Last 4 digits of account number	er <u>0132</u>		
Add t	he dollar value o	f vour entries in Col	umn A on this page. Write that numbe	er here:	\$549,055.00	
		•	e dollar value totals from all pages.		·	
	that number her		o aonar ranao totalo ironi an pageo.		\$549,055.00	
Part 2	List Others t	o Be Notified for	Debt That You Already Listed			
trying t than or	o collect from yo	u for a debt you ow	notified about your bankruptcy for a c to someone else, list the creditor in ou listed in Part 1, list the additional c page.	Part 1, and the	n list the collection agency here. S	imilarly, if you have more
	Name, Number, St James C Hart	reet, City, State & Zip man	Code	On which	line in Part 1 did you enter the credito	or? _ 2.1 _
	Magee Hartma 1 N county St Waukegan, IL			Last 4 dig	its of account number	
	, ,	reet, City, State & Zip		On which	line in Part 1 did you enter the credito	or? _2.2 _
	230 W Monro Chicago, IL 60	e Street STE 112 0606	25	Last 4 dig	its of account number	

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Page 22 of 56 Document Fill in this information to identify your case: Debtor 1 Peter M. Crabtree Middle Name Last Name First Name Debtor 2 Jana M. Crabtree (Spouse if, filing) First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known) Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2 List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount 2.1 **Internal Revenue Service** Last 4 digits of account number \$50,085.00 \$50,085.00 \$0.00 Priority Creditor's Name 2008 Centralized Insolvency When was the debt incurred? **Operations** PO Box 7346 Philadelphia, PA 19101-7346 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only □ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ■ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? Claims for death or personal injury while you were intoxicated ■ No ☐ Other. Specify

Personal taxes

☐ Yes

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	btor 2 Jana M. Crabtree	Case number (if know)					
2.2	Internal Revenue Service	Last 4 digits of account number		\$25,953.00	\$25,953.00	\$0.00	
	Priority Creditor's Name Centralized Insolvency Operations PO Box 7346	When was the debt incurred?	2010				
	Philadelphia, PA 19101-7346						
	Number Street City State Zlp Code	As of the date you file, the clain	is: Check all t	hat apply			
	Who incurred the debt? Check one.	☐ Contingent					
	☐ Debtor 1 only	☐ Unliquidated					
	Debtor 2 only	☐ Disputed					
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts	you owe the go	overnment			
	Is the claim subject to offset?	☐ Claims for death or personal in					
	■ No	☐ Other. Specify					
	Yes	Taxes					
2.3		Last 4 digits of account number	•	\$6,523.00	\$6,523.00	\$0.00	
	Priority Creditor's Name Centralized Insolvency	When was the debt incurred?	2015				
	Operations	when was the dept incurred?	2015				
	PO Box 7346						
	Philadelphia, PA 19101-7346						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the clain	is: Check all t	hat apply			
	<u> </u>	☐ Contingent					
	☐ Debtor 1 only	☐ Unliquidated					
	☐ Debtor 2 only	☐ Disputed					
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:				
	☐ At least one of the debtors and another	☐ Domestic support obligations					
	☐ Check if this claim is for a community debt	Taxes and certain other debts	you owe the go	vernment			
	Is the claim subject to offset?	☐ Claims for death or personal in	ijury while you v	were intoxicated			
	■ No	☐ Other. Specify					
	☐ Yes	Taxes					
Par	t 2: List All of Your NONPRIORITY Unsecu	ured Claims					
3.	Do any creditors have nonpriority unsecured claim	ns against you?					
	☐ No. You have nothing to report in this part. Submit	this form to the court with your other	schedules.				
	■ Yes.						
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other	laim. For each claim listed, identify w	hat type of clain	m it is. Do not list claim	s already included in Par	t 1. If more	

Total claim

Part 2.

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Debto	72 Jana M. Crabtree	Case number (if know)					
4.1	Bonn Coll	Last 4 digits of account number 7516	\$156.00				
	Nonpriority Creditor's Name Po Box 150621 Ogden, UT 84415	When was the debt incurred? Opened 5/07/15					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Contingent					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:					
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Neuropsychiatric Assoc Of II	_				
4.2	Consolidated Path Consultants Nonpriority Creditor's Name	Last 4 digits of account number	\$526.00				
	75 Remittance Dr Ste 1895 Chicago, IL 60675-1895	When was the debt incurred?	_				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Medical services	_				
4.3	Credit Collection Serv	Last 4 digits of account number 4830	\$161.00				
	Nonpriority Creditor's Name 725 Canton St Norwood, MA 02062	When was the debt incurred? Opened 03/15	_				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated ☐ Disputed					
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Collection Attorney Progressive					

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	Peter M. Crabtree Jana M. Crabtree	Case number (if know)				
	North Shore Univeristy Health	Last 4 digits of account number	\$1,076.08			
	Nonpriority Creditor's Name 100 Suth Owasso Blvd. W Saint Paul, MN 55117	When was the debt incurred?				
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical services				
	Northwestern lake Forest Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$72.68			
	660 N. Westmoreland Rd. Lake Forest, IL 60045	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical services				
	Northwestern medical group Nonpriority Creditor's Name	Last 4 digits of account number	\$70.00			
	% Grant & Weber, Inc 5586 S Ft Apache Rd, Suite 110	When was the debt incurred?				
	Las Vegas, NV 89148 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans				
	Check if this claim is for a community debt					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Medical services				
		· · ·				

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Debtor 2 Jana M. Crabtree Case number (if know) 4.7 **Park Dental Care** Last 4 digits of account number 4503 \$215.00 Nonpriority Creditor's Name When was the debt incurred? 1105 West Park Avenue Suite 8 Libertyville, IL 60048 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts T Yes Medical services Other, Specify 4.8 **Progressive Universal Insurance** Last 4 digits of account number 1211 \$161.93 Nonpriority Creditor's Name %Credit Collection Services When was the debt incurred? 725 Canton Street Norwood, MA 02062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Insurance Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Americollect Line **4.4** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims Po Box 1566 Manitowoc, WI 54221 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Grant & Weber, Inc. Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Suite 100 Part 2: Creditors with Nonpriority Unsecured Claims Las Vegas, NV 89148 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Line 4.6 of (Check one): Harris & Harris, Ltd. ☐ Part 1: Creditors with Priority Unsecured Claims 111 West Jackson Blvd, Suite #400 Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60604-4135 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Pinnacle Management Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 514 Market Loop, #103

Debtor 1 Peter M. Crabtree

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	Case number (if know)			
	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Last 4 digits of account number	— Fart 2. Ordators with Norpholity discoured Glaims			
On which entry in Part 1 or Part 2	did you list the original creditor?			
Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
	Part 2: Creditors with Nonpriority Unsecured Claims			
Last 4 digits of account number				
On which entry in Part 1 or Part 2	did you list the original creditor?			
Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Last 4 digits of account number				
	On which entry in Part 1 or Part 2 Line 4.2 of (Check one): Last 4 digits of account number On which entry in Part 1 or Part 2			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	82,561.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	82,561.00
					<u> </u>
				•	Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
	01	you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	2,438.69
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	2,438.69

Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Peter M. Crabtree	•					
	First Name	Middle Name	Last Name				
Debtor 2	Jana M. Crabtree						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS				
Case number (if known)					Check if this is an		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 AT

State what the contract or lease is for
Cell phone agreement through May 2019

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		Docume	ent Page 29 d	of 56	
Fill in this i	information to identify your	case:			
Debtor 1	Peter M. Crabtree				
	First Name	Middle Name	Last Name		
Debtor 2	Jana M. Crabtree				
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numb	er				
(if known)				☐ Check if this	is an
				amended fili	ng
	_				
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
	and case number (if known) ou have any codebtors? (If y			as a codebtor.	
■ No					
☐ Yes					
	in the last 8 years, have you a, California, Idaho, Louisiana,			y? (Community property states and territories in ington, and Wisconsin.)	ıclude
No. 0	Go to line 3.				
☐ Yes.	Did your spouse, former spou	ise, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the per sure you have listed the creditor on Schedul 6G). Use Schedule D, Schedule E/F, or Sche	e D (Official
	Column 1: Your codebtor			Column 2: The creditor to whom you ow	a tha daht
	ame, Number, Street, City, State and ZI	P Code		Check all schedules that apply:	e the debt
3.1				Schedule D, line	
N	lame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	lumber Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	lame			☐ Schedule E/F, line	
				☐ Schedule E/F, line	
_					
	lumber Street City	State	ZIP Code		
C	ліу	Giale	ZII COUE		

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E:II	in their information to information									
	in this information to identify your obtor 1 Peter M. Cra									
						_				
	btor 2 Jana M. Cra	ibtree				-				
Uni	ited States Bankruptcy Court for the	e: NORTHERN DISTRIC	T OF IL	LINOIS		_				
	se number						Check if this is:			
(If kr	nown)						☐ An amende	d filing		
									postpetition chapter llowing date:	
<u>O</u>	fficial Form 106I						MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome							12/1	
atta	use. If you are separated and you che a separate sheet to this form. The second secon	On the top of any addition								
1.	Fill in your employment information.		Debte	or 1			Debtor 2	or non-fili	ing spouse	
	If you have more than one job,	Employment status	■ Er	nployed			■ Emplo	■ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not employed				
	employers.	Occupation	Fina	ncial Advis	sor (1099	9)	Graysla	ke Public	Library	
	Include part-time, seasonal, or self-employed work.	Employer's name					100 Libi	ary Lane	•	
	Occupation may include student or homemaker, if it applies.	Employer's address					IL 6006	3		
		How long employed the	nere?	4 years	S			4 years		
Pai	dive Details About Mo	nthly Income								
	imate monthly income as of the cuse unless you are separated.	late you file this form. If y	ou hav	e nothing to	report for a	any lir	ne, write \$0 in the	space. Incl	lude your non-filing	
	ou or your non-filing spouse have m e space, attach a separate sheet to		mbine t	he information	on for all e	mploy	ers for that perso	n on the lin	nes below. If you need	
						ı	For Debtor 1	For Deb	otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$_	0.00	\$	2,550.00	

. Calculate gross Income. Add line 2 + line 3. 4. \$______ \$____\$ _____\$ \$______\$

0.00

+\$

0.00

Estimate and list monthly overtime pay.

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	otor 1 otor 2	Peter M. Crabtree Jana M. Crabtree	-		Case	e number (<i>if kn</i>	own)	_				
	Cor	ny line 4 hore	4.		Fo \$	r Debtor 1			For Debt	ıg spou	se	
	Cot	by line 4 here	4.		Φ_	U	.00	-	Φ	2,550	.00	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	58	a.	\$	0	.00)	\$	433	.50	
	5b.	Mandatory contributions for retirement plans	5b	b.	\$	0	.00		\$	0	.00	
	5c.	Voluntary contributions for retirement plans	50	c.	\$	0	.00		\$	0	.00	
	5d.	Required repayments of retirement fund loans	50	d.	\$_	0	.00		\$	112	.56	
	5e.	Insurance	56		\$_		.00	_	\$.00	
	5f.	Domestic support obligations	5f		\$_		.00	_	\$.00	
	5g.	Union dues	5 <u>(</u>	-	\$_		.00	_	\$.00	
	5h.	Other deductions. Specify:	_ 5h	n.+	\$_	0	.00	+	\$	0	.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0	.00	_	\$	546	.06	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0	.00		\$	2,003	.94	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$	1.605	: 6 <i>1</i>		\$	300	00	
	8b.	Interest and dividends	8k		\$,	.00	_	\$.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$.00	_	\$.00	
	8d.	Unemployment compensation	80	d.	\$	0	.00	_	\$	0	.00	
	8e.	Social Security	86	Э.	\$	0	.00	_	\$	0	.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_		.00	_	\$.00	
	8g.	Pension or retirement income	80	_	\$_		.00	_	\$.00	
	8h.	Other monthly income. Specify:	_ 01	h.+ _	\$_	U	.00	_ +	Ф		.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	1,605	.64		\$	30	0.00	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,605.64	_		2,303.9	94 = \$		3,909.58
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ –		1,003.04	' '	<u> </u>	2,303.3	- T	_	3,909.30
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	dep			•			d in <i>Sched</i>	dule J. 1. +\$		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reserve that amount on the Summary of Schedules and Statistical Summary of Certailies							if it	2. \$		3,909.58
13.	Do	you expect an increase or decrease within the year after you file this form	?								nbin nthly	ed income
		No. Yes. Explain:						—				

For the Most Recent	t 6 Mon	ths:												
	May 2	2018	Apr 20	118	March 2	2018	February	v 2018	January	2018	Decembe	or 2017	ТОТ	'ΔΙ
Revenues	i viay 2	.010	ح الم	710	<u>IMAI CITZ</u>	.010	<u>i cordar</u>	<u> </u>	<u>January</u>	2010	Decembe	.1 2017	101	<u>AL</u>
		¢7,000,07		#4.407.00		¢040.04		¢ (740 04		#070.40		¢040.00		¢47.075.4
Infinex Gross Revenue (1099-Line 2	¢050.40	\$7,333.07	¢050.40	\$1,126.92	#050.40	\$910.31	#050.40	\$6,718.31	¢050.40	\$873.12	#050.40	\$913.38	¢4.540.77	\$17,875.1
E & O Insurance	\$258.13		\$258.12		\$258.13		\$258.13		\$258.13		\$258.13		\$1,548.77	
Tech. Package	\$130.00		\$130.00		\$130.00		\$130.00		\$190.00		\$190.00		\$900.00	
Advisor-directed expenses	44.50				4.10		4.00		44.50		\$985.68		\$985.68	
Regulatory expenses	\$1.50				\$6.48		\$4.98		\$1.50		\$1,152.00		\$1,166.46	
Other Tech. expenses		4067.17		405- :-		400	\$250.00	A		A		40 =	\$250.00	A
Total Infinex Expenses		\$389.63		\$388.12		\$394.61		\$643.11		\$449.63		\$2,585.81		\$4,850.9
ACH transfer from Infinex		\$6,943.44		\$738.80		\$515.70		\$6,075.20		\$423.49		-\$1,672.43		\$13,024.2
Expenses														
Advertising													\$0.00	
Meals									\$56.24				\$56.24	
Supplies									\$28.70		\$28.91		\$57.61	
Travel					\$9.75		\$9.75		\$9.50		720.72		\$29.00	
Repairs & Maintenance					Ψσ		Ψσ		Ψ7.00				\$0.00	
Printing & Graphics													\$0.00	
Gifts									\$28.71				\$28.71	
Magazines, newspapers	\$15.12		\$36.99				\$1.00		¥2017 1		\$36.99		\$90.10	
Postage	¥15.12		Ψσσ,		\$3.31		\$22.99		\$4.15		ψοσι,,		\$30.45	
Software subscriptions	\$12.73		\$7.43		\$7.43		\$7.43		\$7.43				\$42.45	
CRM	\$99.00		\$99.00		\$99.00		\$99.00		\$99.00		\$99.00		\$594.00	
Online storage	\$12.98		\$12.98		\$12.98		\$12.98		\$12.98		\$12.98		\$77.88	
Email Service	\$10.00		\$10.00		\$10.00		\$10.00		\$10.00		\$20.00		\$70.00	
Phone	\$27.98		\$27.87		\$55.96		\$27.98		\$55.18		Ψ20.00		\$194.97	
Website	\$49.00		\$49.00		\$49.00		\$49.00		\$49.00		\$49.00		\$294.00	
Domain names	4 17100		\$78.27		ψ		\$75.87		\$13.95		\$13.95		\$182.04	
LinkedIn	\$29.99		\$29.99		\$29.99		\$29.99		\$29.99		\$29.99		\$179.94	
Secretary of State filing fees	Ψ27.77		Ψ27.77		Ψ27.77		ΨΣ7.77		Ψ27.77		\$553.00		\$553.00	
Legal/Professional Services											4000.00		\$0.00	
Equipment													\$0.00	
Training, Coaching													\$0.00	
Books													\$0.00	
Memberships	\$325.00		\$275.00				\$310.00						\$910.00	
Total Expenses	ψ023.00	\$581.80	Ψ273.00	\$626.53		\$277.42	ψ010.00	\$655.99		\$404.83		\$843.82	Ψ710.00	\$3,390.3
NET INCOME		\$6,361.64		\$112.27		\$277.42		\$5,419.21		\$18.66	-	-\$2,516.25		\$9,633.81

Fill	in this informa	ation to identify yo	ur case:								
Deb	otor 1	Peter M. Cral	btree				Che	eck if th	nis is:		
	otor 2 ouse, if filing)	Jana M. Crab				 An amended filing A supplement showing postpetition chapter 13 expenses as of the following date: 					
	, ,,								<u>'</u>		
Unit	ed States Bankı	ruptcy Court for the:	NORTH	ERN DISTRICT OF I	LLINOIS			MM /	DD / YYYY		
1	e number nown)										
Of	fficial Fo	rm 106J									
		J: Your I								12/1	
info	ormation. If m		eded, atta	ch another sheet to						or supplying correct your name and case	
Par		ribe Your House	hold								
1.	Is this a joir										
	□ No. Go to										
	■ Yes. Doe	es Debtor 2 live i	n a separa	ate household?							
	■ N □ Y	-	t file Offici	al Form 106J-2, <i>Expe</i>	enses for Se	parate House	ehold of De	btor 2.			
2.	Do you hav	e dependents?	□ No								
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information each dependent		endent's relat tor 1 or Debto			ependent's ge	Does dependent live with you?	
	Do not state	the								□ No	
	dependents	names.			Sor	1		_ 2	8	Yes	
										□ No □ Yes	
										□ No	
										☐ Yes	
										□ No	
3.	Do vour ext	penses include	_							☐ Yes	
0.	expenses o	of people other the d your depender	nan $_{f \Box}$	No Yes							
Par		nate Your Ongoir									
exp		a date after the b								apter 13 case to report of the form and fill in the	
the	value of suc	h assistance and		government assistar luded it on <i>Schedul</i> e					Vour ovn	oncos	
(Of	ficial Form 10	J6I.)							Your exp	elises	
4.		or home owners and any rent for the		ses for your residen r lot.	ice. Include	first mortgag	e 4.	\$		2,800.00	
	If not include	ded in line 4:									
	4a. Real e	estate taxes					4a.	\$		0.00	
		erty, homeowner's	, or renter	s insurance			4a. 4b.	· —		0.00	
	4c. Home	maintenance, re	pair, and ι	pkeep expenses			4c.			200.00	
_		owner's associati			na hama a=:	iitu loona	4d.			0.00	
5.	Auditional I	mortgage payme	ints for yo	our residence, such a	as nome equ	iity ioans	5.	Ф		325.00	

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Debtor 1		Crabtree							
Debtor 2	Jana M.	Craptree	Case num	Case number (if known)					
. Uti	lities:								
6a.	Electricity,	heat, natural gas	6a.	\$	303.00				
6b.	Water, sev	ver, garbage collection	6b.	\$	50.00				
6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	310.00				
6d.	Other. Spe	ecify:	6d.	\$	0.00				
Fo		ekeeping supplies	7.	\$	900.00				
Ch	ildcare and c	hildren's education costs	8.	\$	0.00				
Clo	othing, laund	ry, and dry cleaning	9.	\$	150.00				
	-	roducts and services	10.	\$	100.00				
	•	ntal expenses	11.	\$	100.00				
		Include gas, maintenance, bus or train fare.		,					
	not include ca		12.	\$	225.00				
En	tertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	100.00				
Ch	aritable cont	ributions and religious donations	14.	\$	0.00				
Ins	surance.								
		surance deducted from your pay or included in lines 4 or 2							
15a	a. Life insura	nce	15a.		0.00				
15k	o. Health ins	urance	15b.	\$	475.00				
150	c. Vehicle ins	surance	15c.	\$	89.00				
150	d. Other insu	rance. Specify:	15d.	\$	0.00				
. Tax	xes. Do not in	clude taxes deducted from your pay or included in lines 4 of							
Spe	ecify: 1099	Income taxes	16.	\$	300.00				
		ease payments:							
		ents for Vehicle 1	17a.	·	0.00				
		ents for Vehicle 2	17b.	·	0.00				
	c. Other. Spe		17c.	\$	0.00				
	d. Other. Spe	•	17d.	\$	0.00				
		of alimony, maintenance, and support that you did not		•	0.00				
		your pay on line 5, Schedule I, Your Income (Official Fo		\$					
		s you make to support others who do not live with you.		\$	0.00				
	ecify:		19.						
		erty expenses not included in lines 4 or 5 of this form of			0.00				
	a. Mortgages b. Real estat	s on other property	20a. 20b.	·	0.00				
_					0.00				
		nomeowner's, or renter's insurance	20c.		0.00				
		ice, repair, and upkeep expenses	20d.	·	0.00				
		er's association or condominium dues	20e.	*	0.00				
. Oth	her: Specify:	Pet and vet	21.	+\$	60.00				
. Ca	lculate vour i	monthly expenses							
	a. Add lines 4	• •		\$	6,487.00				
		2 (monthly expenses for Debtor 2), if any, from Official Forr	n 106J-2	\$	3,101100				
		a and 22b. The result is your monthly expenses.		\$	6,487.00				
22(. Aud IIIIE 220	a and 22b. The result is your monthly expenses.		Ψ	0,407.00				
		monthly net income.			<u> </u>				
		12 (your combined monthly income) from Schedule I.	23a.	\$	3,909.58				
23k	o. Copy your	monthly expenses from line 22c above.	23b.	-\$	6,487.00				
230	c. Subtract v	our monthly expenses from your monthly income.							
200		is your monthly net income.	23c.	\$	-2,577.42				
4 D-	VOII 027054	on increase or decrease in very expenses within the co-	or ofter year file 45:	form?					
		an increase or decrease in your expenses within the year or do you expect to finish paying for your car loan within the year or do you			e or decrease because of a				
		terms of your mortgage?	spoor your moregage	paymont to moreas	5. 30010000 D000000 01 d				
	No.								
		Evolain horo:							
	No. Yes.	Explain here:							

Fill in this inform	nation to identify your	case:				
Debtor 1	Peter M. Crabtree					
	First Name	Middle Name	Las	st Name	_	
Debtor 2	Jana M. Crabtree					
(Spouse if, filing)	First Name	Middle Name	Las	st Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINO	DIS		
Case number						
(if known)						☐ Check if this is an amended filing
						amonada ming
Official Form	n 106Dec					
Declarati	ion About a	ın Individua	I Debt	or's Sched	ules	12/15
f two married pe	ople are filing together	r, both are equally resp	onsible for s	supplying correct info	rmation.	
Vau must fila this	form whonover you fi	la hankruntay sahadula	se or amond	ad schadulas Makina	a falso staton	nent, concealing property, or
						, or imprisonment for up to 20
	3 U.S.C. §§ 152, 1341, 1		.,,			,
Sign	Below					
Did you pay	or agree to pay some	one who is NOT an atto	orney to help	you fill out bankrupt	cy forms?	
■ No						
☐ Yes. N	ame of person				Attach Bankri	uptcy Petition Preparer's Notice,
					Declaration, a	and Signature (Official Form 119)
Under nenal	ty of periury. I declare	that I have read the sur	mmary and s	schedules filed with the	nis declaration	and
	true and correct.	and mayo rodd and od	a. y ana c	Jonean Comment		
Y Isl Boto	r M. Crabtree		v	/s/ Jana M. Crabtr	200	
	I. Crabtree		^	Jana M. Crabtree	CC	
	e of Debtor 1			Signature of Debtor 2	2	
9				•		

Date June 6, 2018

Date June 6, 2018

Fill	in this inform	nation to identify you	case:			
Del	otor 1	Peter M. Crabtre	e			
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	Jana M. Crabtree	Middle Name	Last Name		
		nkruptcy Court for the:	NORTHERN DISTRICT			
0111	ica Giaics Dai	intupitely doubt for the.	- NORTHERN BIOTRIOT	OI ILLINOIO		
	se number				_	Check if this is an amended filing
	ficial For atement		Affairs for Indivi	duals Filing for	Bankruptcy	4/16
info num	rmation. If m ber (if knowr	ore space is needed, i). Answer every ques	attach a separate sheet to	o this form. On the top of a	re equally responsible for su ny additional pages, write yo	
1.		current marital statu		a Livea Beloic		
	■ Married □ Not mar	ried				
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do r	not include where you live no	ow.	
	Debtor 1 Pr	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	Address:	Dates Debtor 2 lived there
3. state					unity property state or territor Rico, Texas, Washington and V	
	■ No □ Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (C	Official Form 106H).		
Par	Explai	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	u received from all jobs and	ng a business during this all businesses, including pa ve together, list it only once		endar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$14,839.00	■ Wages, commissions, bonuses, tips	\$12,577.31
			Operating a business		☐ Operating a business	

Official Form 107

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Document Page 37 of 56 Debtor 1 Peter M. Crabtree Debtor 2 Jana M. Crabtree Case number (if known) **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) \$0.00 \$2,172.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For last calendar year: \$29,149.00 \$23,121.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips Operating a business ☐ Operating a business \$0.00 \$3,669.00 ☐ Wages, commissions, ☐ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year before that: \$67,926.00 \$21,579.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a business ☐ Operating a business \$0.00 \$2,000.00 ☐ Wages, commissions, □ Wages, commissions, bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Case 18-16305 Doc 1 Filed 06/07/18 Entered 06/07/18 10:53:02 Desc Main Page 38 of 56 Document Debtor 1 Peter M. Crabtree Debtor 2 Jana M. Crabtree Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment** Total amount Amount you Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Amount vou Dates of payment **Total amount** Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment **Total amount** Amount you Include creditor's name paid still owe Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Circuit Court 19th Judic. MTGLQ Investors LP vs Peter M. Residential Pending Crabtree, Jana M Crabtree et al. **Foreclosure** Circuit □ On appeal 13 CH 1552 18 N County □ Concluded Waukegan, IL 60085 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

No. Go to line 11.

Creditor Name and Address

Yes. Fill in the information below.

Describe the Property

Explain what happened

Value of the

property

Date

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	otor 1 Peter M. C Jana M. Cr		Doddinon: 1 c	Case number (if known)		
		to make a payment beca		uding a bank or financial institution, set off any amounts from your			
	Creditor Name an	d Address	Describe the action the co	reditor took	Date action was taken	Amount	
		re you filed for bankruptc ceiver, a custodian, or an		y in the possession of an a	ssignee for the bene	efit of creditors, a	
Part	List Certain	Gifts and Contributions					
13.	■ No □ Yes. Fill in the	ore you filed for bankruptondetails for each gift.	y, did you give any gifts w Describe the gifts	rith a total value of more th	Dates you gave the gifts	? Value	
	Person to Whom You Gave the Gift and Address:						
 14. Within 2 years before you filed for bankruptcy, did you giv ■ No □ Yes. Fill in the details for each gift or contribution. 			r contributions with a total	value of more than	\$600 to any charity?		
	more than \$600 Charity's Name	ons to charities that total	Describe what you c	ontributed	Dates you contributed	Value	
Part	t 6: List Certain	_osses					
	Within 1 year before or gambling? No Yes. Fill in the		or since you filed for ban	kruptcy, did you lose anytl	hing because of thef	t, fire, other disaster	
	Describe the prophow the loss occu	irred Inc	cribe any insurance cove ude the amount that insurar rrance claims on line 33 of 3	nce has paid. List pending	Date of your loss	Value of property lost	
Pari	t 7: List Certain	Payments or Transfers					
	consulted about se	eking bankruptcy or prepare, bankruptcy petition prepare,	aring a bankruptcy petitio	octing on your behalf pay on? gencies for services required		rty to anyone you	
	Person Who Was Address Email or website a Person Who Made		Description and valu transferred	e of any property	Date payment or transfer was made	Amount of payment	
	Newland and Ne 1512 Artaius Pa Suite #300 Libertyville, IL 6 bk7@newlandla	ewland, LLP rkway 0048	Attorney Fees		5/24/2018	\$2,065.00	

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Debtor 1 Peter M. Crabtree
Debtor 2 Jana M. Crabtree

Case number (if known)

112 Goliad Street Fort Worth, TX 76126-2009 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of		Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and votransferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment
17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No		219 S Dearborn #800	Filing fee				\$335.00
Do not include any payment or transfer that you listed on line 16. No		112 Goliad Street	Online Credit Co	ounseling clas	SS	5/30/2018	\$15.00
Person Who Was Paid Address Description and value of any property transferred was made No Secription and value of any property transferred was made No Secription and value of any property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gits and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you No Yes. Fill in the details. Description and value of payments received or debts paid in exchange Person's relationship to you No Yes. Fill in the details. Name of trust Description and value of the property transferred was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units No Test Part Secretical Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units No Test Fill in the details. Name of financial institution and Address (Number, Street, City, State and ZIP Code) No Test Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Test Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Test Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Test Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Test Fill in the details. No Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Do you still have it? Do you still have it?	promised to help you deal with your creditors or to make payments to your creditors?				or transfer any proper	ty to anyone who	
Person Who Was Paid Address Description and value of any property Date payment or transfer was made		_ 110					
transferred in the ordinary course of your business or financial affairs? Include both outright transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument was closed, sold, moved, or transferred? No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Poscribe the contents Do you still have it? No Last balance Coder Street, City, State and ZIP Code) No else had access to it? Address (Number, Street, City, State and ZIP Code) No label and access to it? Address (Number, Street, City, State and ZIP Code) No else had access to it? Address (Number, Street, City, State and ZIP Code) Poscribe the contents Address (Number, Street, City, State and ZIP Code)		Person Who Was Paid		alue of any prop	perty	or transfer was	Amount of payment
Address Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else had access to it? Describe the contents Do you still have it?		transferred in the ordinary course of your bus Include both outright transfers and transfers mad include gifts and transfers that you have already I No	iness or financial affa e as security (such as the	i rs? he granting of a s			
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)					payments	s received or debts	
beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No You now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		Person's relationship to you					
Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Describe the contents Do you still have it?		beneficiary? (These are often called asset-prote		y property to a s	self-settled tr	ust or similar device o	of which you are a
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ■ No □ Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transfer transfer transferred Last 4 digits of instrument closed, sold, moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? ■ No □ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Describe the contents Do you still have it?							
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Last 4 digits of account or instrument closed, sold, moved, or transferred Last balance before closing or transferred Last balance before closing or transferred Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)							made
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP account number account number account number account or code) Last 4 digits of account or instrument account was closed, sold, moved, or transferred Last balance before closing or moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Do you still have it?	Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Sto	orage Units		
houses, pension funds, cooperatives, associations, and other financial institutions. ■ No □ Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred Last 4 digits of account or instrument closed, sold, moved, or transferred Last balance before closing or transferred Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No □ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		sold, moved, or transferred?	-				
Address (Number, Street, City, State and ZIP 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		houses, pension funds, cooperatives, associations, and other financial institutions. No					
cash, or other valuables? ■ No □ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, bave it? Address (Number, Street, City, bave it?)		Name of Financial Institution and Address (Number, Street, City, State and ZIP	•	• •	cle m	osed, sold, oved, or	before closing or
Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it?	21.						
Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, have it?		_ 110					
		Name of Financial Institution	Address (Number, St		Describe the	contents	

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Debtor 1 Peter M. Crabtree
Debtor 2 Jana M. Crabtree

Case number (if known)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					?		
		No Yes. Fill in the details.					
	Na	me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe t	he contents	Do you still have it?	
Par	t 9:	Identify Property You Hold or Control for	Someone Else				
23.		you hold or control any property that someo someone.	one else owns? Include any proper	ty you borro	owed from, are storing for	r, or hold in trust	
		No Yes. Fill in the details.					
		rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe t	he property	Value	
Par	t 10:	Give Details About Environmental Informa	ation				
For	the p	ourpose of Part 10, the following definitions	apply:				
	toxi regi	ironmental law means any federal, state, or c substances, wastes, or material into the a ulations controlling the cleanup of these sub	ir, land, soil, surface water, ground ostances, wastes, or material.	lwater, or o	ther medium, including st	atutes or	
		means any location, facility, or property as wn, operate, or utilize it, including disposal	-	law, whethe	r you now own, operate,	or utilize it or used	
		<i>ardous material</i> means anything an environ ardous material, pollutant, contaminant, or s		waste, haz	ardous substance, toxic s	substance,	
Rep	ort a	Il notices, releases, and proceedings that yo	ou know about, regardless of wher	they occur	red.		
24.	Has	any governmental unit notified you that you	u may be liable or potentially liable	under or in	violation of an environm	ental law?	
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nmental law, if you t	Date of notice	
25.	Have you notified any governmental unit of any release of hazardous material?						
		No					
	⊔ Na	Yes. Fill in the details. me of site	Governmental unit	Enviro	nmontal law if you	Date of notice	
		dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		nmental law, if you t	Date of notice	
26.	Hav	e you been a party in any judicial or adminis	strative proceeding under any envi	ronmental l	aw? Include settlements	and orders.	
		No Yes. Fill in the details.					
	-	se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of t	he case	Status of the case	
Par	t 11:	Give Details About Your Business or Con	nections to Any Business				
27.	Witl	nin 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the foll	owing connections to any	y business?	
		lacksquare A sole proprietor or self-employed in a t	rade, profession, or other activity,	either full-t	ime or part-time		
		☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)			
Offici	ol Eo	m 107 Statement of	of Financial Affairs for Individuals Filing	for Bankrun	tcv	nage	

Entered 06/07/18 10:53:02 Case 18-16305 Doc 1 Filed 06/07/18 Desc Main Page 42 of 56 Document Debtor 1 Peter M. Crabtree Debtor 2 Jana M. Crabtree Case number (if known) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: **Oak Hill Wealth Management Financial Advisor** Peter M. Crabtree From-To 2014 to current BrownCPA, Northbrook IL 821 NE Holcomb Drive Mundelein, IL 60060 EIN: Jana Crabtree Piece work Cape Sewing debtor social security 821 NE Holcomb Drive From-To 2013- current Mundelein, IL 60060 **Brown Cpa** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Date Issued Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Peter M. Crabtree /s/ Jana M. Crabtree Jana M. Crabtree Peter M. Crabtree Signature of Debtor 1 Signature of Debtor 2 Date Date June 6, 2018 June 6, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	antian to identify your ange.		
	nation to identify your case:		
Debtor 1	Peter M. Crabtree First Name Middle Name	Last Name	
Debtor 2	Jana M. Crabtree		
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Bar	nkruptcy Court for the: NORTHERN DIS	TRICT OF ILLINOIS	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	rm 100		
		riduals Filing Under Chapt	a 7
Statemen	it of intention for indiv	viduals Filing Under Chapto	er / 12/15
If you are an indiv	vidual filing under chapter 7, you must fi	Il out this form if:	
creditors have	claims secured by your property, or		
You must file this	ver is earlier, unless the court extends th	not expired. you file your bankruptcy petition or by the date s he time for cause. You must also send copies to th	
	ople are filing together in a joint case, bo d date the form.	oth are equally responsible for supplying correct i	nformation. Both debtors must
	nd accurate as possible. If more space i our name and case number (if known).	s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured Claims		
For any creditorinformation be		D: Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
Identify the cre	ditor and the property that is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
	ewpennfin-shellpointm	☐ Surrender the property.	□ No
name:		Retain the property and redeem it.	■ Yes
Description of	821 NE Holcomb Dr Mundelein,	☐ Retain the property and enter into a Reaffirmation Agreement.	• res
property	IL 60060 Lake County	Retain the property and [explain]:	
securing debt:		Retain and pay upon successful bank workout	
Part 2: List Yo	ur Unexpired Personal Property Leases		
		l in Schedule G: Executory Contracts and Unexpire	ed Leases (Official Form 106G), fill
		nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	
Describe your ur	nexpired personal property leases		Will the lease be assumed?
Lessor's name:			□ No
Description of lea	sed		□ NO
Property:			☐ Yes
Lessor's name:			□ No
Description of lea Property:	sed		☐ Yes
. ,			— 103

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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	btor 1 Peter M. Crabtor 2 Jana M. Cra		Case number (if known)	
			_	
	ssor's name: scription of leased			□ No
	pperty:			☐ Yes
	ssor's name: scription of leased			□ No
	pperty:			☐ Yes
	ssor's name: scription of leased			□ No
	pperty:			☐ Yes
	ssor's name: scription of leased			□ No
	pperty:			☐ Yes
	ssor's name: scription of leased			□ No
	pperty:			☐ Yes
Par	rt 3: Sign Below			
		, I declare that I have indicated my intention about any o an unexpired lease.	property of my estate that se	cures a debt and any personal
X	/s/ Peter M. Crab	tree X /s/ J	Jana M. Crabtree	
	Peter M. Crabtre		a M. Crabtree	
	Signature of Debtor	1 Sign	ature of Debtor 2	
	Date June 6,	2018 Date	June 6, 2018	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-16305 Doc 1 Filed 06/07/18 Entered 06/07/18 10:53:02 Desc Main Document Page 49 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

Debtor(s) Chapter Disclosure of Compensation of Attorney for the above name compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as folgonized be rendered on behalf of the debtor of the deb	ned debtor(s) and that to me, for services rendered or to
 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above name compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as folked For legal services, I have agreed to accept	ned debtor(s) and that to me, for services rendered or to clows: 2,065.00 2,065.00
compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as fol For legal services, I have agreed to accept Prior to the filing of this statement I have received Balance Due \$ 2. \$\frac{335.00}{} \text{ of the filing fee has been paid.} The source of the compensation paid to me was: Debtor Other (specify): 4. The source of compensation to be paid to me is:	to me, for services rendered or to clows: 2,065.00 2,065.00
Prior to the filing of this statement I have received Balance Due \$ 2. \$ 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): 4. The source of compensation to be paid to me is:	2,065.00
Balance Due \$ 2. \$ 335.00 of the filing fee has been paid. 3. The source of the compensation paid to me was: Debtor Other (specify): 4. The source of compensation to be paid to me is:	<u>-</u> _
 \$ 335.00 of the filing fee has been paid. The source of the compensation paid to me was: Debtor Other (specify): The source of compensation to be paid to me is: 	0.00
 3. The source of the compensation paid to me was: ■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is: 	
■ Debtor □ Other (specify): 4. The source of compensation to be paid to me is:	
4. The source of compensation to be paid to me is:	
5. I have not agreed to share the above-disclosed compensation with any other person unless they are members of the share the above-disclosed compensation with any other person unless they are members.	pers and associates of my law firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members copy of the agreement, together with a list of the names of the people sharing in the compensation is atta	
6. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy c	ase, including:
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to the debtor and filing of any petition, schedules, statement of affairs and plan which may be required;c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hear d. [Other provisions as needed]	
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:	
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for rethis bankruptcy proceeding.	epresentation of the debtor(s) in
June 6, 2018 /s/ Stephen S. Newland	
Date Stephen S. Newland	
Signature of Attorney Newland and Newland, LLP	
1512 Artaius Parkway	
Suite #300	
Libertyville, IL 60048 847-549-0000 Fax: 847-549-1902	
bk7@newlandlaw.com	
Name of law firm	

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Main Offices:

Libertyville Office: 1512 Artaius Parkway, Suite 300 Libertyville, Illinois 60048 Office: 847.549.0000 Fax: 847.549-1902

Arlington Heights Office: 121 S Wilke Road, Suite 301 Arlington Heights, Illinois 60005 Office: 847.797.8001

Fax: 847.797.8001



Arlington Heights - Libertyville - Crystal Lake - Waukegan - Itasca

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Bankruptcy Retainer Agreement OUR LAW FIRM IS A DEBT RELIEF AGENCY. WE HELP PEOPLE FILE FOR BANKRUPTCY RELIEF UNDER THE BANKRUPTCY CODE.

In consideration for services to be rendered to undersigned Client(s), ("Client") by Attorney, Newland & Newland, LLP, ("Attorney"), in connection with representing Client regarding bankruptcy matters, Client, jointly and severally, it is agreed as follows:

	•	5-1-
1.	RETAINER REQUIREMENT: Attorney accepts payment plans. An initial pay	ment of \$is
required	d at the time this Retainer Agreement is signed. The Retainer shall be applied to th	ne balance owed and shall
not be a	an additional fee. Client shall make monthly payments until paid in full.	
	do,	1 10

FEES AND CHARGES FOR SERVICES AND TERMS OF PAYMENT

- 2. INITIAL RETAINER PAYMENT: A payment of \$\frac{2400}{2400}\$ was paid on \$\frac{524110}{24110}\$. Client understands that Attorney requires payment in full, including the court filing fee, prior to preparing Client's Bankruptcy Petition and filing same with the court.
- 3. REQUIRED ONLINE CLASSES: Client is required to complete a law mandated pre-bankruptcy CREDIT COUNSELTING course and pre-discharge DEBTOR EDUCATION course. Client is free to choose any provider approved by the United States Department of Justice. Attorney works with an approved provider, (DECAF). You can access this provider at www.newlandlaw.com/bankruptcy Client is responsible for payment for both courses of \$15 each (for the online version.) Joint debtors will take the courses together and one fee covers both. "CREDIT COUNSELING" class must be completed before case can be filed and "DEBTOR EDUCATION" course must be completed prior to the Trustee hearing. Failure to complete the "DEBTOR EDUCATION" course before hearing date will subject client to additional fees of \$250 if the case is closed without discharge in any circumstance.
- 4. **RETAINER TYPE:** Client acknowledges Attorney has explained the different types of retainers and based on that discussion Client, who has the sole right to decide the type of retainer has agreed the retainer shall be:
- ____a. A security retainer, where the funds are deposited into the Attorney's escrow account, without interest. Attorney shall provide client a billing statement when funds are drawn out of the account.
- b. An advance payment retainer, where the retainer is deposited directly into Attorney's business account and is considered the property of the Attorney. It is understood that this option is for Client's benefit as it is not subject to attachment by creditors.
- 5. BUSINESS ATTACHMENT: If Client's income is from the operation of a business or as an independent contractor (1099), Attorney requires payment of a fee for preparation of a Business Attachment.

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- 6. CONDITIONS FOR PREPARATION: Client understands that when Attorney is paid in full and Client has provided Attorney will all required forms and documents, Attorney will begin preparation of Client's petition.
- 7. POST FILING CREDITOR DATA: Client understands that if after Client's Bankruptcy Petition is filed, Client notifies Attorney of a debt or any other information that was that was omitted by Client, Client agrees to pay Attorney \$100.00 for each amendment to Client's Bankruptcy Petition plus any costs charged by the Court.
- 8. **RETURNED CHECK:** Client understands that if any check given in payment to Attorney is returned for insufficient funds, Client agrees to immediately pay Attorney a \$40.00 fee in addition to the amount of the returned check. This payment and any future payments must therefore be made in cash or certified funds.

Client's Schedule of Fees and Costs

• Attorney Fee for Preparation and Representation of Chapter 7 Case:	<u>\$ 2000</u>
• Filing Fee (Chapter 7):	\$335.00_
Business Attachment:	\$
Reaffirmation Agreement(s): \$100 each agreement	\$
Other costs: credit reports, courier fees, and other direct expenses	\$65.00
TOTAL: \$	2400
TERMS OF SERVICE	Pars 124/18

- 9. ATTORNEY WITHDRAWAL: Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in the State of Illinois and Attorney is an officer of the court. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same.
- 10. NO PROMISE OR GUARANTEE: Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee.
- 11. **RECORDS POLICY:** Client will have 30 days following discharge to arrange collection of documents. After 30 days, non-essential (bill statements etc.) or easily reproduced documents will be shredded. Any essential documents (tax returns, foreclosure data etc.) as well as Newland and Newland work product will be preserved. Client agrees that Attorney may discard any and all Client records following one (1) year of the completion of the Client's bankruptcy case.
- 12. **SERVICES INCLUDED:** Attorney shall provide Client with the following services:
 - Review and analyze Clients financial circumstances based on information provided by Client.
 - b. If possible and to the extent possible, based on the information provided by Client, advise Client of the Clients options, including but not limited to bankruptcy options.
 - c. Inform Client what information needs to be provided in order for Attorney to provide appropriate advice and option information, in the event such information Client provided is insufficient.

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- d. Advise Client of the appropriate requirements in connection with the filing of a Chapter 7 or Chapter 13 bankruptcy, including the duties of Client connected with such filing.
- e. Quote the Client an estimated fee, to the extent possible given the information provided by Client, for the Attorneys service relative to providing bankruptcy assistance or other legal services to Client.
- f. Assuming that a U.S. Bankruptcy proceeding is filed, Attorney services will include all typical Attorney required participation in such proceeding, including but not limited to, appearance at Client's 341 Meeting of Creditors, communications with Client's case trustee as well as the US Trustee, and communication with creditors, when appropriate.
- g. If Client's proceeding requires additional, but not customary work, Attorney will inform Client directly, and enter into a separate written contract for such services to fully apprise Client of the fees, payment requirements, and expected services to be provided. Attorney's hourly rate for non-customary work is \$300 for attorney time and \$150 hourly for paralegal time.
- h. Attorney will utilize paralegal support in the collection of data and preparation of the petition. Paralegals can address most issues related to the filing on an informational basis and can explain processes but cannot give specific advice applying the law to your situation. Attorney may utilize an outside paralegal service for assistance in preparation of petitions and attorney will notify client when outside services are being utilized. Client agrees to cooperate with contracted paralegals in the same manner as in-house employees of Newland and Newland, LLP.
- 13. **FULL DISCLOSURE:** Client acknowledges his/her obligation to make full and complete disclosure of all assets and all liabilities, and to provide all documents and information requested by the Attorney, before the bankruptcy petition can be prepared and filed with the court.
- 14. SCOPE OF REPRESENTATION: Client acknowledges that, on the basis of this agreement, Attorney does not represent Client in any other type of case, lawsuit or proceeding other than Client's bankruptcy case. The Attorney may make a special appearance in a court, other than the Bankruptcy Court, for the purpose of filing a notification of Clients bankruptcy proceedings, and to suggest to another court that Clients proceedings should be stayed. Sending or receiving any summons or complaint, or notifying the Attorney of a pending lawsuit does not obligate the Attorney to represent Client in that lawsuit or before that court. Any representation of Client in a state court proceeding, including without limitation: collection lawsuits, foreclosure lawsuits, and etc., is not included in this Bankruptcy Retainer Agreement. Any referral made to another Attorney to represent Client is a courtesy only. The Attorney is not associated with any other Attorney outside of the undersigned Attorneys law offices.
- 15. CLIENT'S RESPONSIBILITY FOR DATA: Client acknowledges that the Attorney will not research creditor information, including addresses, account numbers, or balances. The Client must provide this information to the Attorney in writing. Failure to do so may result in unscheduled debts subject to non-dischargeability.
- 16. SERVICES NOT INCLUDED: Client agrees that the following matters are not included within the scope of this Retainer Agreement. Client agrees that, as to the matters listed below, the Attorney will not take any action on Clients behalf, without a written request and/or a separate Retainer Agreement and possibly an additional retainer:
 - a. Motions to revoke a discharge.
 - b. Removal of a pending action in another court.
 - c. Obtaining title reports.
 - d. The determination of real estate or tax liens.
 - e. Appeals to the District Court of Court of Appeals.
 - f. Correcting credit reports.
 - g. Negotiations with Check Systems regarding Client.

- 4 NEWLAND & NEWLAND, LLP
 - h. Motions to Discuss Client's bankruptcy case filed by the Trustee, U.S. Trustee, or any creditor.
 - i. Any adversary proceeding filed by the Trustee, U.S. Trustee, or any other party on any basis, including, without limitations, proceedings to determine dischargability of debts.
 - j. Negotiating reaffirmation agreements when Clients income is not sufficient to rebut the presumption of undue hardship and special circumstances do not warrant the signing of a reaffirmation agreement.
 - k. Motions to redeem personal property.
 - I. Motion to impose or extend the bankruptcy stay.
 - 17. FEE CALCULATIONS FOR TERMINATED SERVICES: After being retained by client; if for any reason attorney's representation for a bankruptcy is terminated; including but not limited to a situation wherein client is not going to file a bankruptcy, or for any reason if attorney and/or client no longer want to continue to maintain an attorney client relationship; attorney is entitled to compensation for services provided at an hourly rate of \$300 per hour for attorney services and \$150 per hour for paralegal services which shall be retained from the retainer paid and the balance shall be refunded to client.
 - 18. LIENS. A Bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Clients statements concerning ownership of real property and any liens attached to Clients real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will not conduct a public records search for lawsuits filed against Client or judgments granted against Client. Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgments, if Clients wishes to obtain one. Client agrees to hold the Attorney harmless if client later discovers liens, lawsuits or judgments against Client or against Clients real estate.
 - 19. AUDITS: Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Client's case is selected for an audit, Client agrees to pay Attorney the customary hourly rate, listed in 12(g) above, for representing Client in such audit. Such audits generally cost \$500 or less although a difficult case can exceed that amount.
 - 20. COVERAGE: Due to scheduling and distance issues, Λttorney may have an attorney outside of Λttorney's firm attend the Client's Creditors/Trustee Hearing (341 meeting). These attorneys appear as an extension of Newland and Newland and Client consents to said action. The cost of this <u>is included</u> in the basic bankruptcy fee. However, if a hearing is continued due to clients failure to appear, a \$100 charge will be made for the rescheduled hearing.
 - 21. POST FILING DOCUMENT REQUESTS: Request for documentation or copies of court documents more than 90 days after discharge will be available for a \$25 service fee. These are sometimes needed. It is recommended you keep your documents safe and accessible.

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United States Bankruptcy Court Northern District of Illinois

In re	Peter M. Crabtree Jana M. Crabtree		Case No.	
		Debtor(s)	Chapter 7	
	V	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	19
	The above-named Debtor(s (our) knowledge.	s) hereby verifies that the list of credi	tors is true and correct to t	he best of my
Date:	June 6, 2018	/s/ Peter M. Crabtree		
		Peter M. Crabtree		
		Signature of Debtor		
Date:	June 6, 2018	/s/ Jana M. Crabtree		
		Jana M. Crabtree		
		Signature of Debtor		

Americollect Attn: Bankruptcy Po Box 1566 Manitowoc, WI 54221

Bonn Coll Po Box 150621 Ogden, UT 84415

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Park Dental Care 1105 West Park Avenue Suite 8 Libertyville, IL 60048

Pinnacle Management 514 Market Loop, #103 Dundee, IL 60118

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